# Form **990-PF**

**Return of Private Foundation** 

or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service For calendar year 2022 or tax year beginning and ending Name of foundation A Employer identification number Lafayette Family Foundation 26-1586475 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number 155 Littlefield Ave (207) 862-8000City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 04401 Bangor, ME G Check all that apply: Initial return Initial return of a former public charity **D** 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation **H** Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here ... 514,417. | (Part I, column (d), must be on cash basis.) \$ Part I Analysis of Revenue and Expenses (c) Adjusted net (d) Disbursements for charitable purposes (b) Net investment (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) expenses per books income income (cash basis only) Contributions, gifts, grants, etc., received ...... 43,411. N/ACheck if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 578. 578. Statement 8,004. 8,004. Statement Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 **b** Gross sales price for all assets on line 6a ..... 7 Capital gain net income (from Part IV, line 2) 0. Net short-term capital gain Income modifications .... Gross sales less returns 10a and allowances b Less: Cost of goods sold c Gross profit or (loss) 11 Other income 51,993. 8,582. 12 Total. Add lines 1 through 11 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages ..... 15 Pension plans, employee benefits ..... 213. 0. 16a Legal fees Stmt 3 Administrative Expenses 8,274. 3,310. 4,964 b Accounting fees Stmt 4 **c** Other professional fees 17 Interest 67. Taxes Stmt 5 0. 0. 18 Depreciation and depletion 19 Occupancy 20 **21** Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative <u>4,</u>964. 8,554. 3,310. expenses. Add lines 13 through 23 35,000. 35,000. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 39,964. 43,554 3,310. Add lines 24 and 25 27 Subtract line 26 from line 12: 8,439 a Excess of revenue over expenses and disbursements 5,272. b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

23501 12-06-22 LHA For Paperwork Reduction Act Notice, see instructions.

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P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of y	
•		column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	61,828.	61,684.	61,684.
	2	Savings and temporary cash investments	179,181.	179,759.	179,759.
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	ľ	,			
	7	disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
Assets	8	Inventories for sale or use		+	
SS	9	Prepaid expenses and deferred charges			
4	104	Investments - U.S. and state government obligations	100.063	100 062	226 402
		Investments - corporate stock Stmt 6	109,963.	109,963.	236,402.
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment: basis			
		Less: accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other Stmt 7	28,567.	36,572.	36,572.
	14	Land, buildings, and equipment: basis			
		Less: accumulated depreciation			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	379,539.	387,978.	514,417.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
'n	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable			
Ë	22	Other liabilities (describe )			
		, and the state of			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
	20	5 1 11 11 11 11 11 11 TOP 100 050 1 1 1 1		3.1	
		and complete lines 24, 25, 29, and 30.			
Ses	24	Net assets without donor restrictions			
au	25				
or Fund Balance	25	Net assets with donor restrictions  Foundations that do not follow FASB ASC 958, check here			
þ					
Ξ		and complete lines 26 through 30.	250 000	250 000	
		Capital stock, trust principal, or current funds	250,000.	250,000.	
Net Assets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	¥ -	* .	
Ass	28	Retained earnings, accumulated income, endowment, or other funds	129,539.	137,978.	
et	29	Total net assets or fund balances	379,539.	387,978.	
_			250 520	200 000	
	30	Total liabilities and net assets/fund balances	379,539.	387,978.	
P	art	III Analysis of Changes in Net Assets or Fund Bal	ances		
_	Total	not accept or fund halanges at hacinains of user. Don't H. anti-men (a). Page 61	n	<u> </u>	
1		net assets or fund balances at beginning of year - Part II, column (a), line 25			370 530
_	•				379,539. 8,439.
		amount from Part I, line 27a			
		r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3			387,978.
		eases not included in line 2 (itemize)	(1.) 12 - 22	5	207 070
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	ımn (b), line 29	6	387,978.
					Form <b>990-PF</b> (2022)

Part IV Capital Gains a	and Losses for Tax on In	vestment Income			J	
	the kind(s) of property sold (for exa arehouse; or common stock, 200 shs		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a						
b NO:	NE					
С						
d						
е		T				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	8	(h) Gain or (loss ((e) plus (f) minus		
<u>a</u>						
b						
C .						
<u>d</u>						
Complete only for assets showin	l ng gain in column (h) and owned by	L the foundation on 12/31/69		/I) Coine (Col. (b) goin	minuo	
Complete only for assets shown	(i) Adjusted basis	(k) Excess of col. (i)	с	(I) Gains (Col. (h) gain ol. (k), but not less that	n -0-) <b>or</b>	
(i) FMV as of 12/31/69	as of 12/31/69	over col. (j), if any		Losses (from col. (		
a		(,,,				
b						
C						
d						
е						
	`	l- in Part I, line 7 nd (6):	<b>}</b>			
Part V   Excise Tax Bas	sed on Investment Incom	ne (Section 4940(a), 4		- see instructio	ns)	
	described in section 4940(d)(2), che			)	,	
	letter: (at			1	73.	
=	enter 1.39% (0.0139) of line 27b. Ex		,	<b>}</b>		
	2, col. (b)					
2 Tax under section 511 (domest	tic section 4947(a)(1) trusts and taxa	able foundations only; others,	enter -0-)	2	0.	
3 Add lines 1 and 2				. 3	73.	
	stic section 4947(a)(1) trusts and tax				0.	
	<b>me</b> . Subtract line 4 from line 3. If ze	ero or less, enter -0-		5	73.	
6 Credits/Payments:		1 1				
a 2022 estimated tax payments and 2021 overpayment credited to 2022 6a 6a 0						
b Exempt foreign organizations - tax withheld at source 6b  c Tax paid with application for extension of time to file (Form 8868) 6c				0.		
c Tax paid with application for ex	0.					
d Backup withholding erroneously withheld 6d 0.  7 Total credits and payments. Add lines 6a through 6d 7					0	
		if Form 0000 is attached	d	7	0.	
	ment of estimated tax. Check here band 8 is more than 7 enter amount	_		_	73.	
	pe: Credited to 2023 estimated tax	ano amount overpaid	Refund			
Entor the amount of fine 10 to t	oo, ordered to Lozo commuted tax		ittiullu			

	TO THE STATE OF TH		2.0	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	-
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	. 1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ (2) On foundation managers. \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. \$ <b>0</b> •			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			Х
_	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
•	By language in the governing instrument, or			
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law</li> </ul>			
	remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV		X	
•	The the realitation have at least φ0,000 in account at any time during the year. If 100, complete t at tin, con (σ), and t at tin time to the time time time year.			
8.8	Enter the states to which the foundation reports or with which it is registered. See instructions.			
-	ME	-		
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	-		
	of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
q	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	0.5		
J	year 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII	9		х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			X
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	"		
''		11		x
19	section 512(b)(13)? If "Yes," attach schedule. See instructions  Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	-''-		<del></del>
12	MINA III III II	12		x
10			Х	<del></del>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address $N/A$		21	
14	The books are in care of Jonathan Withee  Telephone no. (207)	862	_ 8 0	<u> </u>
14	Located at 155 Littlefield Ave., Bangor, ME  ZIP+4 0		00	<del></del>
15		<del>4401</del>		$\overline{}$
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	<b>.</b>	/A	ш
4.0	and enter the amount of tax-exempt interest received or accrued during the year	N	Yes	Na
16	At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority over a bank,		162	-
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country	004	) DE	(0000
	· · · · · · · · · · · · · · · · · · ·	orm <b>99</b> 0	)-PF	(2022)

Part VI-B	Statements Regarding Activities for Which Form 4720 May be Required						
File Form	4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No		
1a During the year, did the foundation (either directly or indirectly):							
(1) Engage	e in the sale or exchange, or leasing of property with a disqualified person?		1a(1)		_X_		
(2) Borrov	v money from, lend money to, or otherwise extend credit to (or accept it from)						
a disqı	ualified person?		1a(2)		_X_		
(3) Furnisl	n goods, services, or facilities to (or accept them from) a disqualified person?		1a(3)		_X_		
(4) Pay co	mpensation to, or pay or reimburse the expenses of, a disqualified person?		1a(4)		_X_		
(5) Transf	er any income or assets to a disqualified person (or make any of either available						
for the	benefit or use of a disqualified person)?		1a(5)		_X_		
(6) Agree	to pay money or property to a government official? (Exception. Check "No"						
if the f	oundation agreed to make a grant to or to employ the official for a period after						
	ation of government service, if terminating within 90 days.)		1a(6)		_X_		
	ver is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations						
section 53.	4941(d)-3 or in a current notice regarding disaster assistance? See instructions	N/A	1b				
<b>c</b> Organizatio	ns relying on a current notice regarding disaster assistance, check here						
<b>d</b> Did the fou	ndation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected						
before the t	irst day of the tax year beginning in 2022?		1d		_X_		
2 Taxes on fa	illure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation						
defined in s	section 4942(j)(3) or 4942(j)(5)):						
a At the end	of tax year 2022, did the foundation have any undistributed income (Part XII, lines						
6d and 6e)	for tax year(s) beginning before 2022?		2a		_X_		
If "Yes," list	the years , , , ,						
<b>b</b> Are there a	ny years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect						
valuation o	f assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach						
	see instructions.)	N/A	2b				
c If the provis	sions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.						
	, <u> </u>						
3a Did the fou	ndation hold more than a 2% direct or indirect interest in any business enterprise at any time						
during the	year?		3a		<u>X</u>		
<b>b</b> If "Yes," did	it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or disqualified persons after						
May 26, 19	69; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispo	se					
	acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,						
	, to determine if the foundation had excess business holdings in 2022.)		3b				
4a Did the fou	ndation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		_X_		
	ndation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose tha	at					
had not bee	en removed from jeopardy before the first day of the tax year beginning in 2022?		4b		X		
		Fo	rm <b>99</b> 0	)-PF	(2022)		

Part VI	-B	Statements Regarding Activities for Which F	orm 4/20 May Be Re	equirea <sub>(contini</sub>	ued)			
<b>5a</b> During	g the	year, did the foundation pay or incur any amount to:					Yes	No
(1) C	Carry o	on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?			5a(1)		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,								
						5a(2)		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?						5a(3)		_X_
(4) Provide a grant to an organization other than a charitable, etc., organization described in section								
4	1945(c	I)(4)(A)? See instructions				5a(4)		_X_
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for								
th	he pre	vention of cruelty to children or animals?				5a(5)		<u> </u>
		er is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify und						
sectio	on 53.4	1945 or in a current notice regarding disaster assistance? See instru	ıctions		N/A	5b		
		ns relying on a current notice regarding disaster assistance, check h						
		er is "Yes" to question 5a(4), does the foundation claim exemption fr			/-			
		responsibility for the grant?			N/A	5d		
		ch the statement required by Regulations section 53.4945-5(d).						
		ndation, during the year, receive any funds, directly or indirectly, to p						
		penefit contract?				6a		_ <u>X</u> _
		ndation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b		X
		b, file Form 8870.				_		37
		during the tax year, was the foundation a party to a prohibited tax s				7a		_X_
		the foundation receive any proceeds or have any net income attribu			N/.A	7b		
		lation subject to the section 4960 tax on payment(s) of more than \$	· ·			8		Х
Part VII		chute payment(s) during the year? Information About Officers, Directors, Truste	es Foundation Man	agers Highly		0		Λ
		Paid Employees, and Contractors	oo, r oanaation man	lagoro, inginy				
l List all	offic	ers, directors, trustees, and foundation managers and tr	neir compensation.					
			(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions t employee benefit pla	0	(e) Exp ccount,	ense
		(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	"   a	allowai	other
J. Dar	nie	l Lafayette III	President	,	·			
L55 L:	itt	lefield Avenue						
Bango:	r,	ME 04401	2.00	0.	0	•		0.
Carla	J.	Lafayette	Vice Presiden	t				
L55 L:	itt	lefield Avenue						
Bango:	r,	ME 04401	2.00	0.	0			0.
			Treasurer/Sec	retary				
		lefield Avenue						
		ME 04401	2.00	0.	0	•		0.
Chris			Registered Ag	ent				
		:lefield Avenue			_			
Bango:		ME 04401	2.00	0.	0	•		0.
2 Compe	ensa	tion of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions t	,	(a) Evn	anca
(a	a) Nan	ne and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions t employee benefit pla and deferred	is a	( <b>e)</b> Exp ccount, allowai	other
	BT/	NATE:	devoted to position		compensation	+	allowai	nces
	ИС	ONE						
						+		
						+		
						+		
<b>Γotal</b> num	ber of	other employees paid over \$50,000				Γ΄		0
					Foi	m <b>99</b> 0	)-PF	(2022)

Part VII Information About Officers, Directors, Trustees, For Paid Employees, and Contractors (continued)	oundation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none	e, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
List the foundation's four largest direct charitable activities during the tax year. Include relevanumber of organizations and other beneficiaries served, conferences convened, research pap		Expenses
1 None		
2		0.
3		
4		
Part VIII-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax 1 None	year on lines 1 and 2.	Amount
1 NOILE		
2		0.
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.

Р	Minimum Investment Return (All domestic foundations must complete this part. Foreign fo	undations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	244,398.
	Average of monthly cash balances	1b	235,766.
	Fair market value of all other assets (see instructions)	1c	0.
	Total (add lines 1a, b, and c)	1d	480,164.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	480,164.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	7,202.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	472,962.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	23,648.
P	art X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations	and certain	
_	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part IX, line 6	1	23,648.
2a	Tax on investment income for 2022 from Part V, line 5 2a 73.		
b	Income tax for 2022. (This does not include the tax from Part V.)		
C	Add lines 2a and 2b	2c	73.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	23,575.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	23,575.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	23,575.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	39,964.
b	Program-related investments - total from Part VIII-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	39,964.

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## Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1 Distributable amount for 2022 from Part X,	22,622			
line 7				23,575.
2 Undistributed income, if any, as of the end of 2022:				
a Enter amount for 2021 only			0.	
<b>b</b> Total for prior years:		0.		
<b>3</b> Excess distributions carryover, if any, to 2022:		0.		
a From 2017 200,510.				
b From 2018 296, 285.				
c From 2019 77,966.				
d From 2020 26,920.				
e From 2021 38,108.				
f Total of lines 3a through e	639,789.			
4 Qualifying distributions for 2022 from				
Part XI, line 4: \$ 39,964.				
a Applied to 2021, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
<b>d</b> Applied to 2022 distributable amount				23,575.
e Remaining amount distributed out of corpus	16,389.			
5 Excess distributions carryover applied to 2022 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a).)  6 Enter the net total of each column as				
indicated below:	656,178.			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	030,170.			
<b>b</b> Prior years' undistributed income. Subtract		0.		
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously		0.		
assessed  d Subtract line 6c from line 6b. Taxable		· ·		
amount - see instructions		0.		
e Undistributed income for 2021. Subtract line		•		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2022. Subtract			3.1	
lines 4d and 5 from line 1. This amount must				
be distributed in 2023				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2017				
not applied on line 5 or line 7	200,510.			
9 Excess distributions carryover to 2023.				
Subtract lines 7 and 8 from line 6a	455,668.			
10 Analysis of line 9:				
<b>a</b> Excess from 2018 296,285.				
<b>b</b> Excess from 2019 77,966.				
c Excess from 2020 26,920.				
d Excess from 2021				
e Excess from 2022 16,389.				

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	te Family F			26-15	586 <b>4</b> 75 Page 10
Part XIII Private Operating F	oundations (see ins	structions and Part VI	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo	r 2022, enter the date of t	he ruling			
<b>b</b> Check box to indicate whether the found	dation is a private operatin	g foundation described	in section	4942(j)(3) or 4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2022	<b>(b)</b> 2021	(c) 2020	(d) 2019	(e) Total
investment return from Part IX for					
each year listed					
<b>b</b> 85% (0.85) of line 2a					
c Qualifying distributions from Part XI,					
line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XIV Supplementary Info			if the foundatior	n had \$5,000 or mo	re in assets
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation whyear (but only if they have contributed r			tributions received by th	e foundation before the clos	se of any tax
See Statement 9					
<b>b</b> List any managers of the foundation whother entity) of which the foundation ha			(or an equally large por	tion of the ownership of a p	artnership or
None					
2 Information Regarding Contribut Check here if the foundatio the foundation makes gifts, grants, etc.	n only makes contribution	s to preselected charitat	ole organizations and do	es not accept unsolicited re a, b, c, and d.	quests for funds. If
<b>a</b> The name, address, and telephone num	ber or email address of th	e person to whom applic	cations should be addre	ssed:	
See Statement 8					
<b>b</b> The form in which applications should I	oe submitted and informat	ion and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographica	l areas, charitable fields	, kinds of institutions, o	r other factors:	

Supplementary information				
3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment 		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
Northern Light Eastern Maine Medical	None	PC	Health Care	
Center Foundation				
PO Box 931				
Bangor, ME 04402-0931				35,000.
Total			3a	35,000.
<b>b</b> Approved for future payment				
None				
1,0120				
Total	<u> </u>		3b	0.
1 Viui			3ม F	orm <b>990-PF</b> (2022)

#### **Analysis of Income-Producing Activities** Part XV-A

Program service revenue:     a     b	(a) Business code	(b) Amount	Exclusion code	(d) Amount	(e) Related or exempt function income
a	code	Amount	code	Amount	Tuttetion income
b					
c					
d					
e					
f					
<b>g</b> Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash			1 4	550	
investments			14		
4 Dividends and interest from securities			14	8,004.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b					
c					
d					
e					
2 Subtotal. Add columns (b), (d), and (e)		0		8,582.	0.
3 Total. Add line 12, columns (b), (d), and (e)				13	8,582.
See worksheet in line 13 instructions to verify calculations.)					

Relationship of Activities to the Accomplishment of Exempt Purposes Part XV-B

N/A	Line No.	Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
		N/A

Form **990-PF** (2022)

		<u>rette Fami</u>					26-158		Pa	age <b>13</b>
Part )	(VI Information Re Exempt Organ		nsfers to a	nd Tra	insactions ar	nd Relationsh	ips With Nonchar	itable		
(oth	the organization directly or indiner than section 501(c)(3) organ	nizations) or in secti	ion 527, relating	g to politi	cal organizations?	on described in sect	ion 501(c)		Yes	No
	nsfers from the reporting found			-				10(1)		х
	Cash Other assets							1a(1) 1a(2)		X
	Other assetser transactions:							14(2)		<u> </u>
	Sales of assets to a noncharita	nble exempt organiza	ation					1b(1)		Х
(2)	Purchases of assets from a no	ncharitable exempt	organization					1b(2)		Х
	Rental of facilities, equipment,									Х
	Reimbursement arrangements									Х
(5)	Loans or loan guarantees							1b(5)		Х
(6)	Performance of services or me	embership or fundra	iising solicitatio	ns				1b(6)		X
	ring of facilities, equipment, ma									X
or s	ne answer to any of the above is services given by the reporting f umn (d) the value of the goods, b. (b) Amount involved	oundation. If the fou other assets, or ser	undation receive	ed less th	nan fair market valu	e in any transaction	-	show in		
(u) Emo no	(b) / lineant involved	(b) Name (	N/A	o oxompt	organization	(u) Description	n or transicis, transactions, and	i sharing arr	angemen	
			11/11							
in s	ne foundation directly or indirect ection 501(c) (other than section 'es," complete the following sch	on 501(c)(3)) or in s	,	or more	tax-exempt organiz	zations described		Yes	X	
	(a) Name of or			<b>(b)</b> Typ	oe of organization		(c) Description of relation	ship		
	N/A									
	Under penalties of perjury, I declare	a that I have examined the	hie return, includin	ng accomp	anving schedules and s	statements, and to the l	past of my knowledge			
Sign Here	and belief, it is true, correct, and co	omplete. Declaration of p		n taxpayer	) is based on all inform	ation of which preparer	has any knowledge.	lay the IRS of eturn with the hown below X Yes	e prepare ? See ins	er
	Signature of officer or trustee Print/Type preparer's na		Dropararia a		ate	Title	Check if PTIN			
Daid			Preparer's s		_	Date	self- employed		001	
Paid Prepa	Joseph R. B		Joseph	R.		05/09/23		$\frac{1289}{1222}$		
Use C		y Dunn Mo	сметт &	rar	ker, LLC		Firm's EIN 01-05	2328	4	

Form **990-PF** (2022)

Phone no. (207)775-2387

Firm's address 2211 Congress St Portland, ME 04102

### Schedule B

Internal Revenue Service Name of the organization

(Form 990)

Department of the Treasury

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

#### Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

**Employer identification number** 

Schedule B (Form 990) (2022)

Lafayette Family Foundation 26-1586475 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2022)

Name of organization Employer identification number

## Lafayette Family Foundation

26-1586475

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	Cecil and Karen Loyd 6745 Cross Gate St. Cumming, GA 30040	\$5,000.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

## Lafayette Family Foundation

26-1586475

Part II	Noncash Property (see instructions). Use duplicate copies of Part I	l if additional space is needed.		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		   \$		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		   \$		
223453 11-15	00		Schedule B (Form 990) (2022)	

Schedule B (Form 990) (2022) Name of organization **Employer identification number** Lafayette Family Foundation 26-1586475 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

223454 11-15-22

Form 990-PF Intere	st on Savin	gs and Tem	porary	Cash In	vestments	Statement 1
Source	Reve	(a) Revenue Per Books		(b) vestment come	(c) Adjusted Net Income	
Various			578.		578.	
Total to Part I, li	ne 3		578.		578.	
Form 990-PF	Dividends	and Inter	est fro	m Secur	ities	Statement 2
Source	Gross Amount	Capital Gains Dividend	Re	(a) venue Books	(b) Net Investment Incom	
Infinex Investment Inc.	8,004.		0.	8,004.	8,00	4.
To Part I, line 4 8,004.			0.	8,004.	8,00	4.
Form 990-PF		Legal	Fees			Statement 3
Description		(a) Expenses Per Books	(b Net In ment I	vest-	(c) Adjusted Net Income	
Legal Fees		213.	0.			0.
To Fm 990-PF, Pg 1, ln 16a		213.	3. 0.			0.
Form 990-PF		Accounti	ng Fees			Statement 4
Description		(a) Expenses Per Books	(b Net In ment I	vest-	(c) Adjusted Net Income	(d) Charitable e Purposes
Accounting Fees		8,274.		3,310.		4,964.

Form 990-PF	Tax	es	Statement 5		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Net Investment Income Tax	67.	0.		0.	
To Form 990-PF, Pg 1, ln 18	67.	0.		0.	

Form 990-PF		Statement 6	
Description		Book Value	Fair Market Value
6,988 Shares Bar Harbor BankSha 300 Shares Camden Natl Corp Com	102,958.	223,895. 12,507.	
Total to Form 990-PF, Part II,	109,963.	236,402.	
Form 990-PF	Other Investments		Statement 7
Description	Valuation Method	Book Value	Fair Market Value
36571.56 Shares DWS GOVT & Agen Sec Cash MGD	cy COST	36,572.	36,572.
Total to Form 990-PF, Part II,	36,572.	36,572.	

Form 990-PF Grant Application Submission Information Statement 8
Part XIV, Lines 2a through 2d

Name and Address of Person to Whom Applications Should be Submitted

Lafayette Family Foundation C/O Jacqueline Rawcliffe, Treasurer 155 Littlefield Avenue Bangor, ME 04401

Telephone Number

207-862-8000

Form and Content of Applications

No particular format required.

Any Submission Deadlines

None

Restrictions and Limitations on Awards

None

Form 990-PF Part XIV - Line 1a Statement 9
List of Foundation Managers

Name of Manager

J. Daniel Lafayette III Carla J. Lafayette